

REPORT WRITING FORMAT:

The evaluator should use his/her own letterhead. BPH letterhead should not be used on independent evaluations.

EVALUATION PURSUANT TO PC 2962

1. Difference of Opinion (DOP):

(NOTE: Bold print in mandatory)

IDENTIFYING DATA

INMATE: _____

CDC #: _____

DOB: _____

REL/TYPE: _____

(example EPRD)

TYPE: _____ Difference of Opinion

EVAL DATE: _____

QUALIFYING:(D) _____

EVALUATOR: _____

FACILITY: _____

SUMMARY: _____

(NOTE: The inmate's name, CDCR number, evaluation date, and page number are required on subsequent pages in a header.)

Mr. _____ is _____-year-old, ethnic background, male/female committed from _____ County. His qualifying offense is a violation of Penal Code § _____, _____. The offense occurred on _____. (Penal Code § _____, _____. This offense occurred on _____.) Mr. _____ was convicted on _____. He was sentenced to a _____ year, _____ month prison term. He entered into CDCR at _____ on _____. He arrived at _____ on _____.

SOURCE OF INFORMATION:

I informed the inmate-patient that the interview is not confidential or for treatment and that I would submit a report with the results of the evaluation to the Board of Parole Hearings to assist in determining eligibility for the Mentally Disordered Offender (MDO) Program, which may include the possibility of psychiatric hospitalization. The inmate-patient appeared to understand the nature of the evaluation and the possible consequences of the interview to the best of his ability.

For reasons not limited to the possibility that an individual being evaluated for the MDO program may have a mental disability or condition that may

quality under the Americans with Disabilities Act, a licensed psychologist conducted the evaluation.

I reviewed the Disability Effective Communication System (DECS) and I determined that (no) modifications or accommodations to interview this inmate-patient. The inmate is classified as NCF dated _____ with a TABE score of _____ dated _____.

Both the available prison Central file and Unit Health Record were reviewed.

1. CRITERION ONE – PRESENCE OF A SEVERE MENTAL DISORDER

(a.) The inmate does have a severe mental disorder. (YES – MEETS CRITERION ONE.)

OR

(b) The inmate does not have a severe mental disorder. (NO – DOES NOT MEET CRITERION ONE.)

The term “severe mental disorder” is defined by statute as “an illness or disease or condition that substantially impairs the person’s thought, perception of reality, emotional process or judgment; or which grossly impairs behavior; or that demonstrates evidence of an acute brain syndrome for which prompt remission, in the absence of treatment, is unlikely.”

A. History

Social History:

Criminal History:

Substance Abuse History:

Mental Health History:

Review of Records:

B. Current Medication:

C. Medical and Psychological Complaints (By inmate/patient)

D. Mental Status:

E. Diagnosis:

DSM-IV

Axis I:
Axis II:
Axis III:
Axis IV:
Axis V:

Or

DSM 5

- F. Conclusion: "Therefore, a/the diagnosis(es) _____ of and its associated symptoms would fall within the statutory definition of a severe mental disorder, meaning an illness or disease or condition that substantially impairs the person's thought, perception of reality, emotional process or judgment, or which grossly impairs behavior."

Therefore the above illness, disease, or condition falls/does not fall in the statutory definition of a severe mental disorder, meaning an illness, disease, or condition that substantially impairs the person's thoughts, perception of reality, emotional process, or judgment, or which grossly impairs behavior.

2. CRITERION TWO – CRIME INVOLVED USE, THREAT, OR IMPLIED THREAT OF FORCE OR VIOLENCE OR CAUSED SERIOUS BODILY INJURY

Per peace officer screening, the inmate used, threatened, or implied the threat of force or violence or did cause great bodily injury in the crime, which is summarized below. If the clinician disagrees with the peace officer's findings, a thorough explanation must be note.:

Offense A: _____

INMATE'S VERSION: _____

Offense B: _____

INMATE'S VERSION: _____

3. CRITERIA THREE - THE INMATE'S SEVERE MENTAL DISORDER WAS ONE OF THE CAUSES OF OR WAS AN AGGRAVATING FACTOR IN THE COMMISSION OF THE CRIME FOR WHICH THE INMATE WAS SENTENCED TO PRISON.

(a) The inmate's severe mental disorder was a cause or aggravating factor in the crime. (YES – MEETS CRITERION THREE.)

or

(b) The inmate's severe mental disorder was not a cause or aggravating factor in the crime. (NO – DOES NOT MEET CRITERION THREE.)

The evaluator must address each crime cited under Criterion Two and address the issues that make his/her decision.

If Criterion One is negative insert the following phrase and proceed to the next criterion:

“As reported above, I do not conclude that the inmate has a severe mental disorder as defined in the statute. Therefore, Criterion Three cannot be positive.”

If Criterion One is positive insert the following phrase and proceed to the next criterion:

“Therefore, taken together, there is sufficient/insufficient data to indicate that his/her severe mental disorder was an aggravating/causative factor in the commission of the offense.”

4. CRITERION FOUR – SEVERE MENTAL DISORDER THAT IS NOT IN REMISSION OR CANNOT BE KEPT IN REMISSION WITHOUT TREATMENT.

Decision on Criterion Four: Use one of the following:

(a) The prisoner's severe mental disorder is not in remission, and the prisoner does meet the statutory definition of “cannot be kept in remission without treatment.” (YES – MEETS CRITERION FOUR.)

Or

(b) The prisoner's severe mental disorder is not in remission. However, the prisoner does not meet the statutory definition of “cannot be kept in remission without treatment.” (YES – DUE TO THE LATTER, DOES MEET CRITERION FOUR.)

Or

- (c) The prisoner's severe mental disorder is in remission. However, the prisoner does meet the statutory definition of "cannot be kept in remission without treatment." (YES – DUE TO THE LATTER, DOES MEET CRITERION FOUR.)

Or

- (d) The prisoner's severe mental disorder is in remission, and the prisoner does not meet the statutory definition of "cannot be kept in remission without treatment." (NO - DOES NOT MEET CRITERION FOUR.)

California Penal Code (PC) 2962 defines remission as a finding that the overt signs and symptoms of the severe mental disorder are controlled either by psychotropic medication or psychosocial support. According to PC 2962, a positive finding for criteria for 4B requires that the mental illness "cannot be kept in remission without treatment" if the severe mental disorder has been in remission, but he or she has within the last year either been physically violent (except in self-defense), made a serious threat of substantial physical harm upon the person of another, intentionally caused property damage, or not voluntarily followed a treatment plan.

4 A. REMISSION:

4 B. CAN/CANNOT BE KEPT IN REMISSION WITHOUT TREATMENT:

In order for the inmate to be found positive on Criterion 4B, the inmate must demonstrate one of four behaviors of concern within the last year. These behaviors include: 1. Physical violence except in self-defense; 2. Serious threat of substantial physical harm upon another; 3. Intentional property damage or; 4. Not voluntarily following a reasonable treatment plan.

If Criterion One is negative insert the following phrase and proceed to the next criterion:

"As reported above, I do not conclude that the inmate has a severe mental disorder as defined in the statute. Therefore, Criterion Four cannot be positive."

If Criterion One is positive insert the following phrase and proceed to the next criterion:

“From current examination and from review of the records, the severe mental disorder *is/is not* in legal remission.”

5. CRITERION FIVE – THE INMATE HAS BEEN IN PSYCHIATRIC TREATMENT FOR THE SEVERE MENTAL DISORDER FOR 90 DAYS OR MORE WITHIN THE YEAR PRIOR TO PAROLE OR RELEASE DATE.

(a) The prisoner has been in treatment for a severe mental disorder for 90 days or more within the year prior to parole or release date. (YES – MEETS CRITERION FIVE.)

Or

(b) The prisoner has not been in treatment for a severe mental disorder for 90 days or more within the year prior to parole or release date. (NO – DOES NOT MEET CRITERION FIVE.)

Give dates and level of care only.

If Criterion One is negative insert the following phrase and proceed to the next criterion:

“As reported above, I do not conclude that the inmate has a severe mental disorder as defined in the statute. Therefore, Criterion Four cannot be positive.”

If Criterion One is positive insert the following phrase and proceed to the next criterion:

The length of treatment, as of the date of my evaluation, meets/does not meet the requirement.

Or

The treatment requirement is “reasonably expected” to be met by the release date.

6. CRITERION SIX – BY REASON OF THE SEVERE MENTAL DISORDER, THE INMATE REPRESENTS A SUBSTANTIAL DANGER OF PHYSICAL HARM TO OTHERS.

If Criterion One is negative, may insert the following phrase and proceed to the next criterion: **“As reported above, I do not conclude that the inmate has a severe mental disorder as defined in the statute. Therefore, Criterion Six cannot be positive.”**

Or

(a) The prisoner represents a substantial danger of physical harm to others by reason of a severe mental disorder. (YES – MEETS CRITERION SIX.)

Or

b) The prisoner does not represent a substantial danger of physical harm to others by reason of a severe mental disorder. (NO – DOES NOT MEET CRITERION SIX.)

1. History of Violence:
2. Prior Performance on Supervised Release:
3. Compliance with Treatment:
4. Insight:
5. Remission:
6. Environmental Risk (Danger to Society):

CONCLUSION:

Based on the information reviewed and current forensic evaluation, it is my professional opinion that the inmate *meets/does not meet* criteria 1,2,3,4,5,6 for hospitalization within a Department of State Hospital's facility under Penal Code § 2962.

(Note: A lot of options here: example ...meets criteria 1,2,4,5 but not 3 or 4...)

I. M. Finished, Ph.D.
Forensic Psychologist

Date Submitted

2. Certification:

The certification report is essentially the same report as a difference of opinion. The major difference being the reference to the individual being evaluated is no longer referred to as an "inmate." The individual is now a "patient" in a Department of State Hospital facility, i.e. Atascadero or Patton. Rarely, the patient may be housed in Salinas Valley State Prison in the Salinas Valley Psychiatric Program.

Example:

IDENTIFYING DATA

PATIENT: _____
CDC #: _____
DOB: _____
REL/TYPE: _____ (example EPRD,RRD)
TYPE: _____ CERTIFICATION
EVAL DATE: _____
QUALIFYING:(D) _____
EVALUATOR: _____
FACILITY: _____
SUMMARY: _____

Note: Follow the Difference of Opinion Format making certain to change Inmate to Patient.

3. Annual Report:

In the Annual report only address Criteria 1, 4a and 4b, and 6. The issues of criteria 2, 3, and 5 are no longer an issue. There are many more medical records for review.

(NOTE: Bold print is mandatory)

IDENTIFYING DATA

PATIENT: _____

CDC #: _____

DOB: _____

REL/TYPE: _____

(example EPRD,RRD)

TYPE: _____ Annual

EVAL DATE: _____

QUALIFYING: _____

EVALUATOR: _____

FACILITY: _____

SUMMARY: _____

(NOTE: The inmate's name, CDCR number, evaluation date, and page number are required on subsequent pages in a header.)

Mr. _____ is _____-year-old, ethnic background, male/female committed from _____ County. His qualifying offense is a violation of Penal Code § _____, _____. The offense occurred on _____. (Penal Code § _____, _____. This offense occurred on _____.) Mr. _____ was convicted on _____. He was sentenced to a _____ year, _____ month prison term. He entered into CDCR at _____ on _____. He arrived at _____ on _____.

SOURCE OF INFORMATION:

I informed the patient that the interview is not confidential or for treatment and that I would submit a report with the results of the evaluation to the Board of Parole Hearings to assist in determining eligibility for the Mentally Disordered Offender (MDO) Program, which may include the possibility of psychiatric hospitalization. The patient appeared to understand the nature of the evaluation and the possible consequences of the interview to the best of his ability.

For reasons not limited to the possibility that an individual being evaluated for the MDO program may have a mental disability or condition that may

quality under the Americans with Disabilities Act, a licensed psychologist conducted the evaluation.

I reviewed the Disability Effective Communication System (DECS) and I determined that (no) modifications or accommodations to interview this patient. The patient is classified as _____ dated _____ with a TABE score of _____ dated _____.

Both the available prison Central file and Unit Health Record were reviewed.

A. CRITERION ONE – PRESENCE OF A SEVERE MENTAL DISORDER

(a.) The patient does have a severe mental disorder. (YES – MEETS CRITERION ONE.)

OR

(b) The patient does not have a severe mental disorder. (NO – DOES NOT MEET CRITERION ONE.)

The term “severe mental disorder” is defined by statute as “an illness or disease or condition that substantially impairs the person’s thought, perception of reality, emotional process or judgment; or which grossly impairs behavior; or that demonstrates evidence of an acute brain syndrome for which prompt remission, in the absence of treatment, is unlikely.”

A. History

Social History:

Criminal History:

Substance Abuse History:

Mental Health History:

Review of Records:

B. Current Medication:

C. Medical and Psychological Complaints (By inmate/patient)

D. Mental Status:

E. Diagnosis:

DSM-IV

Axis I:

Axis II:

Axis III:

Axis IV:

Axis V:

Or

DSM 5

- F. Conclusion: “Therefore, a/the diagnosis(es) _____ of and its associated symptoms would fall within the statutory definition of a severe mental disorder, meaning an illness or disease or condition that substantially impairs the person’s thought, perception of reality, emotional process or judgment, or which grossly impairs behavior.”**

Therefore the above illness, disease, or condition falls/does not fall in the statutory definition of a severe mental disorder, meaning an illness, disease, or condition that substantially impairs the person’s thoughts, perception of reality, emotional process, or judgment, or which grossly impairs behavior.

B. CRITERION FOUR – SEVERE MENTAL DISORDER THAT IS NOT IN REMISSION OR CANNOT BE KEPT IN REMISSION WITHOUT TREATMENT.

Decision on Criterion Four: Use one of the following:

- (a) The prisoner’s severe mental disorder is not in remission, and the prisoner does meet the statutory definition of “cannot be kept in remission without treatment.” (YES – MEETS CRITERION FOUR.)**

Or

- (b) The prisoner’s severe mental disorder is not in remission. However, the prisoner does not meet the statutory definition of “cannot be kept in remission without treatment.” (YES – DUE TO THE LATTER, DOES MEET CRITERION FOUR.)**

Or

- (c) The prisoner’s severe mental disorder is in remission. However, the prisoner does meet the statutory definition of “cannot be kept in remission without treatment.” (YES – DUE TO THE LATTER, DOES MEET CRITERION FOUR.)**

Or

- (d) The prisoner's severe mental disorder is in remission, and the prisoner does not meet the statutory definition of "cannot be kept in remission without treatment." (NO - DOES NOT MEET CRITERION FOUR.)

California Penal Code (PC) 2962 defines remission as a finding that the overt signs and symptoms of the severe mental disorder are controlled either by psychotropic medication or psychosocial support. According to PC 2962, a positive finding for criteria for 4B requires that the mental illness "cannot be kept in remission without treatment" if the severe mental disorder has been in remission, but he or she has within the last year either been physically violent (except in self-defense), made a serious threat of substantial physical harm upon the person of another, intentionally caused property damage, or not voluntarily followed a treatment plan.

4 A. REMISSION:

4 B. CAN/CANNOT BE KEPT IN REMISSION WITHOUT TX:

In order for the inmate to be found positive on Criterion 4B, the patient must demonstrate one of four behaviors of concern within the last year. These behaviors include: 1. Physical violence except in self-defense; 2. Serious threat of substantial physical harm upon another; 3. Intentional property damage or; 4. Not voluntarily following a reasonable treatment plan.

If Criterion One is negative insert the following phrase and proceed to the next criterion:

"As reported above, I do not conclude that the inmate has a severe mental disorder as defined in the statute. Therefore, Criterion Four cannot be positive."

If Criterion One is positive insert the following phrase and proceed to the next criterion:

"From current examination and from review of the records, the severe mental disorder *is/is not* in legal remission."

C. CRITERION SIX – BY REASON OF THE SEVERE MENTAL DISORDER, THE INMATE REPRESENTS A SUBSTANTIAL DANGER OF PHYSICAL HARM TO OTHERS.

If Criterion One is negative, may insert the following phrase and proceed to the next criterion: **"As reported above, I do not conclude that the patient has a**

severe mental disorder as defined in the statute. Therefore, Criterion Six cannot be positive.”

Or

(a) The patient represents a substantial danger of physical harm to others by reason of a severe mental disorder. (YES – MEETS CRITERION SIX.)

Or

b) The patient does not represent a substantial danger of physical harm to others by reason of a severe mental disorder. (NO – DOES NOT MEET CRITERION SIX.)

1. History of Violence:

2. Prior Performance on Supervised Release:

3. Compliance with Treatment:

4. Insight:

5. Remission:

6. Environmental Risk (Danger to Society):

D. CAN THE PATIENT BE SAFELY AND EFFECTIVELY TREATED ON AN OUTPATIENT BASIS?

The patient can/can not be safely and effectively treated on an outpatient basis. You explanation/opinion.

E. FORENSIC CONCLUSIONS:

Based on the information reviewed and current forensic evaluation, it is my professional opinion that the inmate *meets/does not* meet criteria 1, 4, and 6 for hospitalization within a DMH State Hospital under Penal Code § 2962.

(Note: A lot of options here. 1 but not 4 and 6. Etc.)

I. M. Finished, Ph.D.

Forensic Psychologist

Date Submitted

3. Placement Report:

(NOTE: Bold print in mandatory)

I. IDENTIFYING DATA

PATIENT: _____
CDC #: _____
DOB: _____
TYPE: _____ Placement _____
EVAL DATE: _____
EVALUATOR: _____
FACILITY: _____

Mr. _____ is _____ year old _____ male who was admitted to DSH-Atascadero on _____, pursuant to §2962 of the Penal Code as a mentally disordered offender. The purpose of the current evaluation is to determine if Mr. _____ can safely and effectively be treated in an outpatient setting.

SOURCE OF INFORMATION:

I informed the patient that the interview is not confidential or for treatment and that I would submit a report with the results of the evaluation to the Board of Parole Hearings to assist in determining eligibility for the Mentally Disordered Offender (MDO) Program, which may include the possibility of psychiatric hospitalization. The patient appeared to understand the nature of the evaluation and the possible consequences of the interview to the best of his ability.

DECS:

For reasons not limited to the possibility that an individual being evaluated for the MDO program may have a mental disability or condition that may qualify under the Americans with Disabilities Act, a licensed psychologist conducted the evaluation.

I reviewed the Disability Effective Communication System (DECS) and I determined that (no) modifications or accommodations to interview this patient. The patient is classified as _____ dated _____ with a TABE score of _____ dated _____.

Both the available Central file and Unit Health Record were reviewed.

NOTICE OF NON-CONFIDENTIALITY:

A report with the results of the evaluation would be submitted to the Board of Parole Hearings (BPH) to assist in determining continued eligibility for the Mentally Disordered Offender (MDO) program, which may include the continued possibility of psychiatric hospitalization. The patient appeared to understand the nature of the evaluation and the possible consequences of the interview to the best of the patient's ability

II. ANALYSIS OF DATA

A.) TREATMENT HISTORY:

Social History:

Criminal History:

Mental Health History:

Review of Records:

B.) CURRENT STATUS:

The patient was admitted to DSH-Atascadero State Hospital from _____ with a diagnosis of _____ on _____.

Current Medication:

Medical and Psychological Complaints (By inmate/patient)

Mental Status:

B.) CURRENT DIAGNOSIS: (DSM-IV OR DSM 5)

AXIS I:

AXIS II:

AXIS III:

AXIS IV:

AXIS V:

**Summary;
(Example)**

Based on the available records and current mental status evaluation, it is clear the inmate does have a major mental disorder. Mr. _____ has a diagnostic impression of schizophrenia, paranoid type, which falls within the definition of a severe mental disorder, as noted above. It appears he has not been in a reasonable state of remission for an extended period. His mental illness is complicated by his history of substance abuse and personality disorder.

III. PC 2962 CRITERION

**CAN THE PATIENT BE SAFELY AND EFFECTIVELY TREATED IN AN
OUTPATIENT BASIS? Yes or No.**

Your explanation.

IV. FORENSIC CONCLUSIONS

Based on the records reviewed and current forensic evaluation, it is my professional opinion that the patient can/cannot be safely and effectively treated on an outpatient setting.

I. M. Finished, Ph.D.

Forensic Psychologist

Date Submitted

SHORT FORM:**Can only be used with prior permission of the Board of Parole Hearings.****PSYCHOLOGICAL EVALUATION
FOR PENAL CODE 2962 REFERRAL**

INMATE NAME:	
CDC#:	
CDC FACILITY:	
RELEASE DATE:	
EVALUATION DATE:	
EVALUATOR:	

FINDINGS: _____

1. The prisoner has a severe mental disorder.

☐ **YES, MEETS CRITERIA**☐ **NO, DOES NOT MEET CRITERIA**

Axis I: _____

Axis II: _____

2. The crime involved used force or violence, a threat of force or violence, or caused great bodily injury.

☐ **YES, MEETS CRITERIA**☐ **NO, DOES NOT MEET CRITERIA**

PC - _____

3. The severe mental disorder was one of the causes of, or was an aggravating factor in the commission of a crime for which the prisoner was sentenced to prison.

☐ **YES, MEETS CRITERIA**☐ **NO, DOES NOT MEET CRITERIA**

4. The severe mental disorder is not in remission or cannot be kept in remission without treatment.

☐ **YES, MEETS CRITERIA "A"**☐ **NO, DOES NOT MEET CRITERIA "A"**☐ **YES, MEETS CRITERIA "B"**☐ **NO, DOES NOT MEET CRITERIA "B"**

5. The prisoner has been in psychiatric treatment for the severe mental disorder for ninety days or more within the year prior to release on parole.

☐ **YES, MEETS CRITERIA**☐ **NO, DOES NOT MEET CRITERIA**

6. By reason of the severe mental disorder, the prisoner represents a substantial danger of physical harm to others.

☐ **YES, MEETS CRITERIA**☐ **NO, DOES NOT MEET CRITERIA**

Signature: _____

Date: _____

FULL REPORT DUE NO LATER THAN 10 DAYS FROM DATE OF EVALUATION